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FACSIMILE COVER LETTER

To:	Commissioner for Patents Examiner Chuck O. Kendall
Firm:	U.S. Patent and Trademark Office Art Unit 2192
Facsimile:	(571) 273-8300
From:	Thomas F. Presson
Date:	February 6, 2006
Re:	FLH Ref No.: 450106-02850 Serial No: 09/889,459
Number of Pages: (including cover page)	12

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02/06/2006 14:06 FAX 212 588 0500   FROMMER LAWRENCE   ☑002/012

PATENT
450106-02850

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Masashi Nakamura, et al.
Serial No.	:	09/889,459
Filed	:	July 16, 2001
For	:	DIGITAL SIGNAL PROCESSING APPARATUS, SYSTEM THEREOF, AND EXTENSION FUNCTION PROVIDING METHOD
Examiner	:	Chuck O. Kendall
Art Unit	:	2192

745 Fifth Avenue
New York, NY 10151
Tel: 212-588-0800

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	6	Minus	** = 20	* 0 x	$50 (25)	= $ 0
Independent claims	3	Minus	*** = 3	* 0 x	$200 (100)	= $ 0
			Total additional fee for this amendment			$ 0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

☐ This application contains a multiple dependent claim. The required fee of $300 (150) has been previously paid ☐, or is paid herewith ☐.

☐ This response is being filed within the ___ month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.

☐ A check in the amount of $____ is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.

☐ Charge $_____ to Deposit Account No. 50-0320.

☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on February 6, 2006.

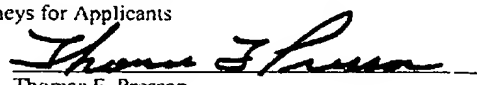_____Barnet Shindlman_____
(Name of person signing transmittal)

_____
Signature

_____February 6, 2006_____
Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
Attorneys for Applicants
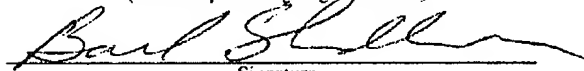
By: _____
Thomas F. Presson
Reg. No. 41,442

00341781

U.S. Application No. 09/889,459   ·FEB 0 6 2006   PATENT
Reply to Office Action dated November 18, 2005   450106-02850

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Masashi Nakamura, et al.
Serial No.	:	09/889,459
For	:	DIGITAL SIGNAL PROCESSING APPARATUS, SYSTEM THEREOF, AND EXTENSION FUNCTION PROVIDING METHOD
Filed	:	July 16, 2001
Examiner	:	Chuck O. Kendall
Art Unit	:	2192
Confirmation No.	:	4050

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New York, NY 10151
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AMENDMENT SUBMITTED UNDER 37 C.F.R. 1.121

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Non-final Office Action mailed on November 18, 2005, having

a three-month statutory period for response set to expire on February 20, 2006 (February 18,

2006 being a Saturday), please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims, which begins

on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.